



Sen. William R. Haine

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1 AMENDMENT TO HOUSE BILL 4327

2 AMENDMENT NO. _____. Amend House Bill 4327 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The Open Meetings Act is amended by changing
5 Section 2 as follows:

6 (5 ILCS 120/2) (from Ch. 102, par. 42)

7 Sec. 2. Open meetings.

8 (a) Openness required. All meetings of public bodies shall
9 be open to the public unless excepted in subsection (c) and
10 closed in accordance with Section 2a.

11 (b) Construction of exceptions. The exceptions contained
12 in subsection (c) are in derogation of the requirement that
13 public bodies meet in the open, and therefore, the exceptions
14 are to be strictly construed, extending only to subjects
15 clearly within their scope. The exceptions authorize but do not
16 require the holding of a closed meeting to discuss a subject

1 included within an enumerated exception.

2 (c) Exceptions. A public body may hold closed meetings to
3 consider the following subjects:

4 (1) The appointment, employment, compensation,
5 discipline, performance, or dismissal of specific
6 employees of the public body or legal counsel for the
7 public body, including hearing testimony on a complaint
8 lodged against an employee of the public body or against
9 legal counsel for the public body to determine its
10 validity.

11 (2) Collective negotiating matters between the public
12 body and its employees or their representatives, or
13 deliberations concerning salary schedules for one or more
14 classes of employees.

15 (3) The selection of a person to fill a public office,
16 as defined in this Act, including a vacancy in a public
17 office, when the public body is given power to appoint
18 under law or ordinance, or the discipline, performance or
19 removal of the occupant of a public office, when the public
20 body is given power to remove the occupant under law or
21 ordinance.

22 (4) Evidence or testimony presented in open hearing, or
23 in closed hearing where specifically authorized by law, to
24 a quasi-adjudicative body, as defined in this Act, provided
25 that the body prepares and makes available for public
26 inspection a written decision setting forth its

1 determinative reasoning.

2 (5) The purchase or lease of real property for the use
3 of the public body, including meetings held for the purpose
4 of discussing whether a particular parcel should be
5 acquired.

6 (6) The setting of a price for sale or lease of
7 property owned by the public body.

8 (7) The sale or purchase of securities, investments, or
9 investment contracts. This exception shall not apply to the
10 investment of assets or income of funds deposited into the
11 Illinois Prepaid Tuition Trust Fund.

12 (8) Security procedures and the use of personnel and
13 equipment to respond to an actual, a threatened, or a
14 reasonably potential danger to the safety of employees,
15 students, staff, the public, or public property.

16 (9) Student disciplinary cases.

17 (10) The placement of individual students in special
18 education programs and other matters relating to
19 individual students.

20 (11) Litigation, when an action against, affecting or
21 on behalf of the particular public body has been filed and
22 is pending before a court or administrative tribunal, or
23 when the public body finds that an action is probable or
24 imminent, in which case the basis for the finding shall be
25 recorded and entered into the minutes of the closed
26 meeting.

1 (12) The establishment of reserves or settlement of
2 claims as provided in the Local Governmental and
3 Governmental Employees Tort Immunity Act, if otherwise the
4 disposition of a claim or potential claim might be
5 prejudiced, or the review or discussion of claims, loss or
6 risk management information, records, data, advice or
7 communications from or with respect to any insurer of the
8 public body or any intergovernmental risk management
9 association or self insurance pool of which the public body
10 is a member.

11 (13) Conciliation of complaints of discrimination in
12 the sale or rental of housing, when closed meetings are
13 authorized by the law or ordinance prescribing fair housing
14 practices and creating a commission or administrative
15 agency for their enforcement.

16 (14) Informant sources, the hiring or assignment of
17 undercover personnel or equipment, or ongoing, prior or
18 future criminal investigations, when discussed by a public
19 body with criminal investigatory responsibilities.

20 (15) Professional ethics or performance when
21 considered by an advisory body appointed to advise a
22 licensing or regulatory agency on matters germane to the
23 advisory body's field of competence.

24 (16) Self evaluation, practices and procedures or
25 professional ethics, when meeting with a representative of
26 a statewide association of which the public body is a

1 member.

2 (17) The recruitment, credentialing, discipline or
3 formal peer review of physicians or other health care
4 professionals for a hospital, or other institution
5 providing medical care, that is operated by the public
6 body.

7 (18) Deliberations for decisions of the Prisoner
8 Review Board.

9 (19) Review or discussion of applications received
10 under the Experimental Organ Transplantation Procedures
11 Act.

12 (20) The classification and discussion of matters
13 classified as confidential or continued confidential by
14 the State Government Suggestion Award Board.

15 (21) Discussion of minutes of meetings lawfully closed
16 under this Act, whether for purposes of approval by the
17 body of the minutes or semi-annual review of the minutes as
18 mandated by Section 2.06.

19 (22) Deliberations for decisions of the State
20 Emergency Medical Services Disciplinary Review Board.

21 (23) The operation by a municipality of a municipal
22 utility or the operation of a municipal power agency or
23 municipal natural gas agency when the discussion involves
24 (i) contracts relating to the purchase, sale, or delivery
25 of electricity or natural gas or (ii) the results or
26 conclusions of load forecast studies.

1 (24) Meetings of a residential health care facility
2 resident sexual assault and death review team or the
3 Executive Council under the Abuse Prevention Review Team
4 Act.

5 (25) Meetings of an independent team of experts under
6 Brian's Law.

7 (26) Meetings of a mortality review team appointed
8 under the Department of Juvenile Justice Mortality Review
9 Team Act.

10 (27) (Blank).

11 (28) Correspondence and records (i) that may not be
12 disclosed under Section 11-9 of the Public Aid Code or (ii)
13 that pertain to appeals under Section 11-8 of the Public
14 Aid Code.

15 (29) Meetings between internal or external auditors
16 and governmental audit committees, finance committees, and
17 their equivalents, when the discussion involves internal
18 control weaknesses, identification of potential fraud risk
19 areas, known or suspected frauds, and fraud interviews
20 conducted in accordance with generally accepted auditing
21 standards of the United States of America.

22 (30) Those meetings or portions of meetings of a ~~an~~
23 ~~at-risk adult~~ fatality review team or the Illinois ~~At-Risk~~
24 ~~Adult~~ Fatality Review Team Advisory Council during which a
25 review of the death of an eligible adult in which abuse or
26 neglect is suspected, alleged, or substantiated is

1 conducted pursuant to Section 15 of the Adult Protective
2 Services Act.

3 (31) ~~(30)~~ Meetings and deliberations for decisions of
4 the Concealed Carry Licensing Review Board under the
5 Firearm Concealed Carry Act.

6 (d) Definitions. For purposes of this Section:

7 "Employee" means a person employed by a public body whose
8 relationship with the public body constitutes an
9 employer-employee relationship under the usual common law
10 rules, and who is not an independent contractor.

11 "Public office" means a position created by or under the
12 Constitution or laws of this State, the occupant of which is
13 charged with the exercise of some portion of the sovereign
14 power of this State. The term "public office" shall include
15 members of the public body, but it shall not include
16 organizational positions filled by members thereof, whether
17 established by law or by a public body itself, that exist to
18 assist the body in the conduct of its business.

19 "Quasi-adjudicative body" means an administrative body
20 charged by law or ordinance with the responsibility to conduct
21 hearings, receive evidence or testimony and make
22 determinations based thereon, but does not include local
23 electoral boards when such bodies are considering petition
24 challenges.

25 (e) Final action. No final action may be taken at a closed
26 meeting. Final action shall be preceded by a public recital of

1 the nature of the matter being considered and other information
2 that will inform the public of the business being conducted.

3 (Source: P.A. 97-318, eff. 1-1-12; 97-333, eff. 8-12-11;
4 97-452, eff. 8-19-11; 97-813, eff. 7-13-12; 97-876, eff.
5 8-1-12; 98-49, eff. 7-1-13; 98-63, eff. 7-9-13; revised
6 7-23-13.)

7 Section 10. The Freedom of Information Act is amended by
8 changing Section 7.5 as follows:

9 (5 ILCS 140/7.5)

10 Sec. 7.5. Statutory Exemptions. To the extent provided for
11 by the statutes referenced below, the following shall be exempt
12 from inspection and copying:

13 (a) All information determined to be confidential under
14 Section 4002 of the Technology Advancement and Development Act.

15 (b) Library circulation and order records identifying
16 library users with specific materials under the Library Records
17 Confidentiality Act.

18 (c) Applications, related documents, and medical records
19 received by the Experimental Organ Transplantation Procedures
20 Board and any and all documents or other records prepared by
21 the Experimental Organ Transplantation Procedures Board or its
22 staff relating to applications it has received.

23 (d) Information and records held by the Department of
24 Public Health and its authorized representatives relating to

1 known or suspected cases of sexually transmissible disease or
2 any information the disclosure of which is restricted under the
3 Illinois Sexually Transmissible Disease Control Act.

4 (e) Information the disclosure of which is exempted under
5 Section 30 of the Radon Industry Licensing Act.

6 (f) Firm performance evaluations under Section 55 of the
7 Architectural, Engineering, and Land Surveying Qualifications
8 Based Selection Act.

9 (g) Information the disclosure of which is restricted and
10 exempted under Section 50 of the Illinois Prepaid Tuition Act.

11 (h) Information the disclosure of which is exempted under
12 the State Officials and Employees Ethics Act, and records of
13 any lawfully created State or local inspector general's office
14 that would be exempt if created or obtained by an Executive
15 Inspector General's office under that Act.

16 (i) Information contained in a local emergency energy plan
17 submitted to a municipality in accordance with a local
18 emergency energy plan ordinance that is adopted under Section
19 11-21.5-5 of the Illinois Municipal Code.

20 (j) Information and data concerning the distribution of
21 surcharge moneys collected and remitted by wireless carriers
22 under the Wireless Emergency Telephone Safety Act.

23 (k) Law enforcement officer identification information or
24 driver identification information compiled by a law
25 enforcement agency or the Department of Transportation under
26 Section 11-212 of the Illinois Vehicle Code.

1 (1) Records and information provided to a residential
2 health care facility resident sexual assault and death review
3 team or the Executive Council under the Abuse Prevention Review
4 Team Act.

5 (m) Information provided to the predatory lending database
6 created pursuant to Article 3 of the Residential Real Property
7 Disclosure Act, except to the extent authorized under that
8 Article.

9 (n) Defense budgets and petitions for certification of
10 compensation and expenses for court appointed trial counsel as
11 provided under Sections 10 and 15 of the Capital Crimes
12 Litigation Act. This subsection (n) shall apply until the
13 conclusion of the trial of the case, even if the prosecution
14 chooses not to pursue the death penalty prior to trial or
15 sentencing.

16 (o) Information that is prohibited from being disclosed
17 under Section 4 of the Illinois Health and Hazardous Substances
18 Registry Act.

19 (p) Security portions of system safety program plans,
20 investigation reports, surveys, schedules, lists, data, or
21 information compiled, collected, or prepared by or for the
22 Regional Transportation Authority under Section 2.11 of the
23 Regional Transportation Authority Act or the St. Clair County
24 Transit District under the Bi-State Transit Safety Act.

25 (q) Information prohibited from being disclosed by the
26 Personnel Records Review Act.

1 (r) Information prohibited from being disclosed by the
2 Illinois School Student Records Act.

3 (s) Information the disclosure of which is restricted under
4 Section 5-108 of the Public Utilities Act.

5 (t) All identified or deidentified health information in
6 the form of health data or medical records contained in, stored
7 in, submitted to, transferred by, or released from the Illinois
8 Health Information Exchange, and identified or deidentified
9 health information in the form of health data and medical
10 records of the Illinois Health Information Exchange in the
11 possession of the Illinois Health Information Exchange
12 Authority due to its administration of the Illinois Health
13 Information Exchange. The terms "identified" and
14 "deidentified" shall be given the same meaning as in the Health
15 Insurance Accountability and Portability Act of 1996, Public
16 Law 104-191, or any subsequent amendments thereto, and any
17 regulations promulgated thereunder.

18 (u) Records and information provided to an independent team
19 of experts under Brian's Law.

20 (v) Names and information of people who have applied for or
21 received Firearm Owner's Identification Cards under the
22 Firearm Owners Identification Card Act or applied for or
23 received a concealed carry license under the Firearm Concealed
24 Carry Act, unless otherwise authorized by the Firearm Concealed
25 Carry Act; and databases under the Firearm Concealed Carry Act,
26 records of the Concealed Carry Licensing Review Board under the

1 Firearm Concealed Carry Act, and law enforcement agency
2 objections under the Firearm Concealed Carry Act.

3 (w) Personally identifiable information which is exempted
4 from disclosure under subsection (g) of Section 19.1 of the
5 Toll Highway Act.

6 (x) Information which is exempted from disclosure under
7 Section 5-1014.3 of the Counties Code or Section 8-11-21 of the
8 Illinois Municipal Code.

9 (y) Confidential information under the Adult Protective
10 Services Act and its predecessor enabling statute, the Elder
11 Abuse and Neglect Act, including information about the identity
12 and administrative finding against any caregiver of a verified
13 and substantiated decision of ~~significant~~ abuse, neglect, or
14 financial exploitation of an eligible adult maintained in the
15 ~~Department of Public Health's Health Care Worker~~ Registry
16 established under Section 7.5.

17 (z) Records and information provided to a ~~an at-risk adult~~
18 fatality review team or the Illinois ~~At Risk Adult~~ Fatality
19 Review Team Advisory Council under Section 15 of the Adult
20 Protective Services Act.

21 (Source: P.A. 97-80, eff. 7-5-11; 97-333, eff. 8-12-11; 97-342,
22 eff. 8-12-11; 97-813, eff. 7-13-12; 97-976, eff. 1-1-13; 98-49,
23 eff. 7-1-13; 98-63, eff. 7-9-13; revised 7-23-13.)

24 Section 15. The Adult Protective Services Act is amended by
25 changing Sections 2, 3, 3.5, 4, 5, 7.5, 8, 9, 13, and 15 as

1 follows:

2 (320 ILCS 20/2) (from Ch. 23, par. 6602)

3 Sec. 2. Definitions. As used in this Act, unless the
4 context requires otherwise:

5 (a) "Abuse" means causing any physical, mental or sexual
6 injury to an eligible adult, including exploitation of such
7 adult's financial resources.

8 Nothing in this Act shall be construed to mean that an
9 eligible adult is a victim of abuse, neglect, or self-neglect
10 for the sole reason that he or she is being furnished with or
11 relies upon treatment by spiritual means through prayer alone,
12 in accordance with the tenets and practices of a recognized
13 church or religious denomination.

14 Nothing in this Act shall be construed to mean that an
15 eligible adult is a victim of abuse because of health care
16 services provided or not provided by licensed health care
17 professionals.

18 (a-5) "Abuser" means a person who abuses, neglects, or
19 financially exploits an eligible adult.

20 (a-6) "Adult with disabilities" means a person aged 18
21 through 59 who resides in a domestic living situation and whose
22 disability as defined in subsection (c-5) impairs his or her
23 ability to seek or obtain protection from abuse, neglect, or
24 exploitation.

25 (a-7) "Caregiver" means a person who either as a result of

1 a family relationship, voluntarily, or in exchange for
2 compensation has assumed responsibility for all or a portion of
3 the care of an eligible adult who needs assistance with
4 activities of daily living or instrumental activities of daily
5 living.

6 (b) "Department" means the Department on Aging of the State
7 of Illinois.

8 (c) "Director" means the Director of the Department.

9 (c-5) "Disability" means a physical or mental disability,
10 including, but not limited to, a developmental disability, an
11 intellectual disability, a mental illness as defined under the
12 Mental Health and Developmental Disabilities Code, or dementia
13 as defined under the Alzheimer's Disease Assistance Act.

14 (d) "Domestic living situation" means a residence where the
15 eligible adult at the time of the report lives alone or with
16 his or her family or a caregiver, or others, or other
17 community-based unlicensed facility, but is not:

18 (1) A licensed facility as defined in Section 1-113 of
19 the Nursing Home Care Act;

20 (1.5) A facility licensed under the ID/DD Community
21 Care Act;

22 (1.7) A facility licensed under the Specialized Mental
23 Health Rehabilitation Act of 2013;

24 (2) A "life care facility" as defined in the Life Care
25 Facilities Act;

26 (3) A home, institution, or other place operated by the

1 federal government or agency thereof or by the State of
2 Illinois;

3 (4) A hospital, sanitarium, or other institution, the
4 principal activity or business of which is the diagnosis,
5 care, and treatment of human illness through the
6 maintenance and operation of organized facilities
7 therefor, which is required to be licensed under the
8 Hospital Licensing Act;

9 (5) A "community living facility" as defined in the
10 Community Living Facilities Licensing Act;

11 (6) (Blank);

12 (7) A "community-integrated living arrangement" as
13 defined in the Community-Integrated Living Arrangements
14 Licensure and Certification Act or a "community
15 residential alternative" as licensed under that Act;

16 (8) An assisted living or shared housing establishment
17 as defined in the Assisted Living and Shared Housing Act;
18 or

19 (9) A supportive living facility as described in
20 Section 5-5.01a of the Illinois Public Aid Code.

21 (e) "Eligible adult" means either an adult with
22 disabilities aged 18 through 59 or a person aged 60 or older
23 who resides in a domestic living situation and is, or is
24 alleged to be, abused, neglected, or financially exploited by
25 another individual or who neglects himself or herself.

26 (f) "Emergency" means a situation in which an eligible

1 adult is living in conditions presenting a risk of death or
2 physical, mental or sexual injury and the provider agency has
3 reason to believe the eligible adult is unable to consent to
4 services which would alleviate that risk.

5 (f-1) "Financial exploitation" means the use of an eligible
6 adult's resources by another to the disadvantage of that adult
7 or the profit or advantage of a person other than that adult.

8 (f-5) "Mandated reporter" means any of the following
9 persons while engaged in carrying out their professional
10 duties:

11 (1) a professional or professional's delegate while
12 engaged in: (i) social services, (ii) law enforcement,
13 (iii) education, (iv) the care of an eligible adult or
14 eligible adults, or (v) any of the occupations required to
15 be licensed under the Clinical Psychologist Licensing Act,
16 the Clinical Social Work and Social Work Practice Act, the
17 Illinois Dental Practice Act, the Dietitian Nutritionist
18 Practice Act, the Marriage and Family Therapy Licensing
19 Act, the Medical Practice Act of 1987, the Naprapathic
20 Practice Act, the Nurse Practice Act, the Nursing Home
21 Administrators Licensing and Disciplinary Act, the
22 Illinois Occupational Therapy Practice Act, the Illinois
23 Optometric Practice Act of 1987, the Pharmacy Practice Act,
24 the Illinois Physical Therapy Act, the Physician Assistant
25 Practice Act of 1987, the Podiatric Medical Practice Act of
26 1987, the Respiratory Care Practice Act, the Professional

1 Counselor and Clinical Professional Counselor Licensing
2 and Practice Act, the Illinois Speech-Language Pathology
3 and Audiology Practice Act, the Veterinary Medicine and
4 Surgery Practice Act of 2004, and the Illinois Public
5 Accounting Act;

6 (1.5) an employee of an entity providing developmental
7 disabilities services or service coordination funded by
8 the Department of Human Services;

9 (2) an employee of a vocational rehabilitation
10 facility prescribed or supervised by the Department of
11 Human Services;

12 (3) an administrator, employee, or person providing
13 services in or through an unlicensed community based
14 facility;

15 (4) any religious practitioner who provides treatment
16 by prayer or spiritual means alone in accordance with the
17 tenets and practices of a recognized church or religious
18 denomination, except as to information received in any
19 confession or sacred communication enjoined by the
20 discipline of the religious denomination to be held
21 confidential;

22 (5) field personnel of the Department of Healthcare and
23 Family Services, Department of Public Health, and
24 Department of Human Services, and any county or municipal
25 health department;

26 (6) personnel of the Department of Human Services, the

1 Guardianship and Advocacy Commission, the State Fire
2 Marshal, local fire departments, the Department on Aging
3 and its subsidiary Area Agencies on Aging and provider
4 agencies, and the Office of State Long Term Care Ombudsman;

5 (7) any employee of the State of Illinois not otherwise
6 specified herein who is involved in providing services to
7 eligible adults, including professionals providing medical
8 or rehabilitation services and all other persons having
9 direct contact with eligible adults;

10 (8) a person who performs the duties of a coroner or
11 medical examiner; or

12 (9) a person who performs the duties of a paramedic or
13 an emergency medical technician.

14 (g) "Neglect" means another individual's failure to
15 provide an eligible adult with or willful withholding from an
16 eligible adult the necessities of life including, but not
17 limited to, food, clothing, shelter or health care. This
18 subsection does not create any new affirmative duty to provide
19 support to eligible adults. Nothing in this Act shall be
20 construed to mean that an eligible adult is a victim of neglect
21 because of health care services provided or not provided by
22 licensed health care professionals.

23 (h) "Provider agency" means any public or nonprofit agency
24 in a planning and service area that is selected by the
25 Department or appointed by the regional administrative agency
26 with prior approval by the Department on Aging to receive and

1 assess reports of alleged or suspected abuse, neglect, or
2 financial exploitation. A provider agency is also referenced as
3 a "designated agency" in this Act.

4 (i) "Regional administrative agency" means any public or
5 nonprofit agency in a planning and service area that provides
6 regional oversight and performs functions as set forth in
7 subsection (b) of Section 3 of this Act. The Department shall
8 designate an Area Agency on Aging as the regional
9 administrative agency or, in the event the Area Agency on Aging
10 in that planning and service area is deemed by the Department
11 to be unwilling or unable to provide those functions, the
12 Department may serve as the regional administrative agency or
13 designate another qualified entity to serve as the regional
14 administrative agency; any such designation shall be subject to
15 terms set forth by the Department. ~~so designated by the~~
16 ~~Department, provided that the designated Area Agency on Aging~~
17 ~~shall be designated the regional administrative agency if it so~~
18 ~~requests. The Department shall assume the functions of the~~
19 ~~regional administrative agency for any planning and service~~
20 ~~area where another agency is not so designated.~~

21 (i-5) "Self-neglect" means a condition that is the result
22 of an eligible adult's inability, due to physical or mental
23 impairments, or both, or a diminished capacity, to perform
24 essential self-care tasks that substantially threaten his or
25 her own health, including: providing essential food, clothing,
26 shelter, and health care; and obtaining goods and services

1 necessary to maintain physical health, mental health,
2 emotional well-being, and general safety. The term includes
3 compulsive hoarding, which is characterized by the acquisition
4 and retention of large quantities of items and materials that
5 produce an extensively cluttered living space, which
6 significantly impairs the performance of essential self-care
7 tasks or otherwise substantially threatens life or safety.

8 (j) "Substantiated case" means a reported case of alleged
9 or suspected abuse, neglect, financial exploitation, or
10 self-neglect in which a provider agency, after assessment,
11 determines that there is reason to believe abuse, neglect, or
12 financial exploitation has occurred.

13 (k) "Verified" means a determination that there is "clear
14 and convincing evidence" that the specific injury or harm
15 alleged was the result of abuse, neglect, or financial
16 exploitation.

17 (Source: P.A. 97-38, eff. 6-28-11; 97-227, eff. 1-1-12; 97-300,
18 eff. 8-11-11; 97-706, eff. 6-25-12; 97-813, eff. 7-13-12;
19 97-1141, eff. 12-28-12; 98-49, eff. 7-1-13; 98-104, eff.
20 7-22-13; revised 9-19-13.)

21 (320 ILCS 20/3) (from Ch. 23, par. 6603)

22 Sec. 3. Responsibilities.

23 (a) The Department shall establish, design, and manage a
24 protective services program for eligible adults who have been,
25 or are alleged to be, victims of abuse, neglect, financial

1 exploitation, or self-neglect. The Department shall contract
2 with or fund, or contract with and fund, regional
3 administrative agencies, provider agencies, or both, for the
4 provision of those functions, and, contingent on adequate
5 funding, with attorneys or legal services provider agencies for
6 the provision of legal assistance pursuant to this Act. For
7 self-neglect, the program shall include the following services
8 for eligible adults who have been removed from their residences
9 for the purpose of cleanup or repairs: temporary housing;
10 counseling; and caseworker services to try to ensure that the
11 conditions necessitating the removal do not reoccur.

12 (a-1) The Department shall by rule develop standards for
13 minimum staffing levels and staff qualifications. The
14 Department shall by rule establish mandatory standards for the
15 investigation of abuse, neglect, financial exploitation, or
16 self-neglect of eligible adults and mandatory procedures for
17 linking eligible adults to appropriate services and supports.

18 (a-5) A provider agency shall, in accordance with rules
19 promulgated by the Department, establish a multi-disciplinary
20 team to act in an advisory role for the purpose of providing
21 professional knowledge and expertise in the handling of complex
22 abuse cases involving eligible adults. Each multi-disciplinary
23 team shall consist of one volunteer representative from the
24 following professions: banking or finance; disability care;
25 health care; law; law enforcement; mental health care; and
26 clergy. A provider agency may also choose to add

1 representatives from the fields of substance abuse, domestic
2 violence, sexual assault, or other related fields. To support
3 multi-disciplinary teams in this role, law enforcement
4 agencies and coroners or medical examiners shall supply records
5 as may be requested in particular cases.

6 (b) Each regional administrative agency shall designate
7 provider agencies within its planning and service area with
8 prior approval by the Department on Aging, monitor the use of
9 services, provide technical assistance to the provider
10 agencies and be involved in program development activities.

11 (c) Provider agencies shall assist, to the extent possible,
12 eligible adults who need agency services to allow them to
13 continue to function independently. Such assistance shall
14 include, but not be limited to, receiving reports of alleged or
15 suspected abuse, neglect, financial exploitation, or
16 self-neglect, conducting face-to-face assessments of such
17 reported cases, determination of substantiated cases, referral
18 of substantiated cases for necessary support services,
19 referral of criminal conduct to law enforcement in accordance
20 with Department guidelines, and provision of case work and
21 follow-up services on substantiated cases. In the case of a
22 report of alleged or suspected abuse or neglect that places an
23 eligible adult at risk of injury or death, a provider agency
24 shall respond to the report on an emergency basis in accordance
25 with guidelines established by the Department by
26 administrative rule and shall ensure that it is capable of

1 responding to such a report 24 hours per day, 7 days per week.
2 A provider agency may use an on-call system to respond to
3 reports of alleged or suspected abuse or neglect after hours
4 and on weekends.

5 (c-5) Where a provider agency has reason to believe that
6 the death of an eligible adult may be the result of abuse or
7 neglect, including any reports made after death, the agency
8 shall immediately report the matter to both the appropriate law
9 enforcement agency and the coroner or medical examiner. Between
10 30 and 45 days after making such a report, the provider agency
11 again shall contact the law enforcement agency and coroner or
12 medical examiner to determine whether any further action was
13 taken. Upon request by a provider agency, a law enforcement
14 agency and coroner or medical examiner shall supply a summary
15 of its action in response to a reported death of an eligible
16 adult. A copy of the report shall be maintained and all
17 subsequent follow-up with the law enforcement agency and
18 coroner or medical examiner shall be documented in the case
19 record of the eligible adult. If the law enforcement agency,
20 coroner, or medical examiner determines the reported death was
21 caused by abuse or neglect by a caregiver, the law enforcement
22 agency, coroner, or medical examiner shall inform the
23 Department, and the Department shall report the caregiver's
24 identity on the Registry as described in Section 7.5 of this
25 Act.

26 (d) Upon sufficient appropriations to implement a

1 statewide program, the Department shall implement a program,
2 based on the recommendations of the Self-Neglect Steering
3 Committee, for (i) responding to reports of possible
4 self-neglect, (ii) protecting the autonomy, rights, privacy,
5 and privileges of adults during investigations of possible
6 self-neglect and consequential judicial proceedings regarding
7 competency, (iii) collecting and sharing relevant information
8 and data among the Department, provider agencies, regional
9 administrative agencies, and relevant seniors, (iv) developing
10 working agreements between provider agencies and law
11 enforcement, where practicable, and (v) developing procedures
12 for collecting data regarding incidents of self-neglect.

13 (Source: P.A. 98-49, eff. 7-1-13.)

14 (320 ILCS 20/3.5)

15 Sec. 3.5. Other Responsibilities. The Department shall
16 also be responsible for the following activities, contingent
17 upon adequate funding; implementation shall be expanded to
18 adults with disabilities upon the effective date of this
19 amendatory Act of the 98th General Assembly, except those
20 responsibilities under subsection (a), which shall be
21 undertaken as soon as practicable:

22 (a) promotion of a wide range of endeavors for the
23 purpose of preventing abuse, neglect, financial
24 exploitation, and self-neglect, including, but not limited
25 to, promotion of public and professional education to

1 increase awareness of abuse, neglect, financial
2 exploitation, and self-neglect; to increase reports; to
3 establish access to and use of the ~~Health Care Worker~~
4 Registry established under Section 7.5; and to improve
5 response by various legal, financial, social, and health
6 systems;

7 (b) coordination of efforts with other agencies,
8 councils, and like entities, to include but not be limited
9 to, the Administrative Office of the Illinois Courts, the
10 Office of the Attorney General, the State Police, the
11 Illinois Law Enforcement Training Standards Board, the
12 State Triad, the Illinois Criminal Justice Information
13 Authority, the Departments of Public Health, Healthcare
14 and Family Services, and Human Services, the Illinois
15 Guardianship and Advocacy Commission, the Family Violence
16 Coordinating Council, the Illinois Violence Prevention
17 Authority, and other entities which may impact awareness
18 of, and response to, abuse, neglect, financial
19 exploitation, and self-neglect;

20 (c) collection and analysis of data;

21 (d) monitoring of the performance of regional
22 administrative agencies and adult protective services
23 agencies;

24 (e) promotion of prevention activities;

25 (f) establishing and coordinating an aggressive
26 training program on the unique nature of adult abuse cases

1 with other agencies, councils, and like entities, to
2 include but not be limited to the Office of the Attorney
3 General, the State Police, the Illinois Law Enforcement
4 Training Standards Board, the State Triad, the Illinois
5 Criminal Justice Information Authority, the State
6 Departments of Public Health, Healthcare and Family
7 Services, and Human Services, the Family Violence
8 Coordinating Council, the Illinois Violence Prevention
9 Authority, the agency designated by the Governor under
10 Section 1 of the Protection and Advocacy for
11 Developmentally Disabled Persons Act, and other entities
12 that may impact awareness of and response to abuse,
13 neglect, financial exploitation, and self-neglect;

14 (g) solicitation of financial institutions for the
15 purpose of making information available to the general
16 public warning of financial exploitation of adults and
17 related financial fraud or abuse, including such
18 information and warnings available through signage or
19 other written materials provided by the Department on the
20 premises of such financial institutions, provided that the
21 manner of displaying or distributing such information is
22 subject to the sole discretion of each financial
23 institution;

24 (g-1) developing by joint rulemaking with the
25 Department of Financial and Professional Regulation
26 minimum training standards which shall be used by financial

1 institutions for their current and new employees with
2 direct customer contact; the Department of Financial and
3 Professional Regulation shall retain sole visitation and
4 enforcement authority under this subsection (g-1); the
5 Department of Financial and Professional Regulation shall
6 provide bi-annual reports to the Department setting forth
7 aggregate statistics on the training programs required
8 under this subsection (g-1); and

9 (h) coordinating efforts with utility and electric
10 companies to send notices in utility bills to explain to
11 persons 60 years of age or older their rights regarding
12 telemarketing and home repair fraud.

13 (Source: P.A. 98-49, eff. 7-1-13.)

14 (320 ILCS 20/4) (from Ch. 23, par. 6604)

15 Sec. 4. Reports of abuse or neglect.

16 (a) Any person who suspects the abuse, neglect, financial
17 exploitation, or self-neglect of an eligible adult may report
18 this suspicion to an agency designated to receive such reports
19 under this Act or to the Department.

20 (a-5) If any mandated reporter has reason to believe that
21 an eligible adult, who because of a disability or other
22 condition or impairment is unable to seek assistance for
23 himself or herself, has, within the previous 12 months, been
24 subjected to abuse, neglect, or financial exploitation, the
25 mandated reporter shall, within 24 hours after developing such

1 belief, report this suspicion to an agency designated to
2 receive such reports under this Act or to the Department. The
3 agency designated to receive such reports under this Act or the
4 Department may establish a manner in which a mandated reporter
5 can make the required report through an Internet reporting
6 tool. Information sent and received through the Internet
7 reporting tool is subject to the same rules in this Act as
8 other types of confidential reporting established by the
9 designated agency or the Department. Whenever a mandated
10 reporter is required to report under this Act in his or her
11 capacity as a member of the staff of a medical or other public
12 or private institution, facility, or agency, he or she shall
13 make a report to an agency designated to receive such reports
14 under this Act or to the Department in accordance with the
15 provisions of this Act and may also notify the person in charge
16 of the institution, facility, ~~board and care home,~~ or agency or
17 his or her designated agent that the report has been made.
18 Under no circumstances shall any person in charge of such
19 institution, facility, ~~board and care home,~~ or agency, or his
20 or her designated agent to whom the notification has been made,
21 exercise any control, restraint, modification, or other change
22 in the report or the forwarding of the report to an agency
23 designated to receive such reports under this Act or to the
24 Department. The privileged quality of communication between
25 any professional person required to report and his or her
26 patient or client shall not apply to situations involving

1 abused, neglected, or financially exploited eligible adults
2 and shall not constitute grounds for failure to report as
3 required by this Act.

4 (a-7) A person making a report under this Act in the belief
5 that it is in the alleged victim's best interest shall be
6 immune from criminal or civil liability or professional
7 disciplinary action on account of making the report,
8 notwithstanding any requirements concerning the
9 confidentiality of information with respect to such eligible
10 adult which might otherwise be applicable.

11 (a-9) Law enforcement officers shall continue to report
12 incidents of alleged abuse pursuant to the Illinois Domestic
13 Violence Act of 1986, notwithstanding any requirements under
14 this Act.

15 (b) Any person, institution or agency participating in the
16 making of a report, providing information or records related to
17 a report, assessment, or services, or participating in the
18 investigation of a report under this Act in good faith, or
19 taking photographs or x-rays as a result of an authorized
20 assessment, shall have immunity from any civil, criminal or
21 other liability in any civil, criminal or other proceeding
22 brought in consequence of making such report or assessment or
23 on account of submitting or otherwise disclosing such
24 photographs or x-rays to any agency designated to receive
25 reports of alleged or suspected abuse or neglect. Any person,
26 institution or agency authorized by the Department to provide

1 assessment, intervention, or administrative services under
2 this Act shall, in the good faith performance of those
3 services, have immunity from any civil, criminal or other
4 liability in any civil, criminal, or other proceeding brought
5 as a consequence of the performance of those services. For the
6 purposes of any civil, criminal, or other proceeding, the good
7 faith of any person required to report, permitted to report, or
8 participating in an investigation of a report of alleged or
9 suspected abuse, neglect, financial exploitation, or
10 self-neglect shall be presumed.

11 (c) The identity of a person making a report of alleged or
12 suspected abuse, neglect, financial exploitation, or
13 self-neglect under this Act may be disclosed by the Department
14 or other agency provided for in this Act only with such
15 person's written consent or by court order, but is otherwise
16 confidential.

17 (d) The Department shall by rule establish a system for
18 filing and compiling reports made under this Act.

19 (e) Any physician who willfully fails to report as required
20 by this Act shall be referred to the Illinois State Medical
21 Disciplinary Board for action in accordance with subdivision
22 (A)(22) of Section 22 of the Medical Practice Act of 1987. Any
23 dentist or dental hygienist who willfully fails to report as
24 required by this Act shall be referred to the Department of
25 Professional Regulation for action in accordance with
26 paragraph 19 of Section 23 of the Illinois Dental Practice Act.

1 Any optometrist who willfully fails to report as required by
2 this Act shall be referred to the Department of Financial and
3 Professional Regulation for action in accordance with
4 paragraph (15) of subsection (a) of Section 24 of the Illinois
5 Optometric Practice Act of 1987. Any other mandated reporter
6 required by this Act to report suspected abuse, neglect, or
7 financial exploitation who willfully fails to report the same
8 is guilty of a Class A misdemeanor.

9 (Source: P.A. 97-860, eff. 7-30-12; 98-49, eff. 7-1-13.)

10 (320 ILCS 20/5) (from Ch. 23, par. 6605)

11 Sec. 5. Procedure.

12 (a) A provider agency designated to receive reports of
13 alleged or suspected abuse, neglect, financial exploitation,
14 or self-neglect under this Act shall, upon receiving such a
15 report, conduct a face-to-face assessment with respect to such
16 report, in accord with established law and Department
17 protocols, procedures, and policies. Face-to-face assessments,
18 casework, and follow-up of reports of self-neglect by the
19 provider agencies designated to receive reports of
20 self-neglect shall be subject to sufficient appropriation for
21 statewide implementation of assessments, casework, and
22 follow-up of reports of self-neglect. In the absence of
23 sufficient appropriation for statewide implementation of
24 assessments, casework, and follow-up of reports of
25 self-neglect, the designated adult protective services

1 provider agency shall refer all reports of self-neglect to the
2 appropriate agency or agencies as designated by the Department
3 for any follow-up. The assessment shall include, but not be
4 limited to, a visit to the residence of the eligible adult who
5 is the subject of the report and may include interviews or
6 consultations with service agencies or individuals who may have
7 knowledge of the eligible adult's circumstances. If, after the
8 assessment, the provider agency determines that the case is
9 substantiated it shall develop a service care plan for the
10 eligible adult and may report its findings at any time during
11 the case to the appropriate law enforcement agency in accord
12 with established law and Department protocols, procedures, and
13 policies. In developing a case plan, the provider agency may
14 consult with any other appropriate provider of services, and
15 such providers shall be immune from civil or criminal liability
16 on account of such acts. The plan shall include alternative
17 suggested or recommended services which are appropriate to the
18 needs of the eligible adult and which involve the least
19 restriction of the eligible adult's activities commensurate
20 with his or her needs. Only those services to which consent is
21 provided in accordance with Section 9 of this Act shall be
22 provided, contingent upon the availability of such services.

23 (b) A provider agency shall refer evidence of crimes
24 against an eligible adult to the appropriate law enforcement
25 agency according to Department policies. A referral to law
26 enforcement may be made at intake or any time during the case.

1 Where a provider agency has reason to believe the death of an
2 eligible adult may be the result of abuse or neglect, the
3 agency shall immediately report the matter to the coroner or
4 medical examiner and shall cooperate fully with any subsequent
5 investigation.

6 (c) If any person other than the alleged victim refuses to
7 allow the provider agency to begin an investigation, interferes
8 with the provider agency's ability to conduct an investigation,
9 or refuses to give access to an eligible adult, the appropriate
10 law enforcement agency must be consulted regarding the
11 investigation.

12 (Source: P.A. 98-49, eff. 7-1-13.)

13 (320 ILCS 20/7.5)

14 Sec. 7.5. ~~Health Care Worker~~ Registry.

15 (a) To protect individuals receiving in-home and
16 community-based services, the Department on Aging shall
17 establish an Adult Protective Service Registry that will be
18 hosted by the Department of Public Health on its website
19 effective January 1, 2015, and, if practicable, shall propose
20 rules for the Registry by January 1, 2015.

21 (a-5) The Registry shall identify caregivers against whom a
22 verified and substantiated finding was made under this Act of
23 abuse, neglect, or financial exploitation.

24 The information in the Registry shall be confidential
25 except as specifically authorized in this Act and shall not be

1 deemed a public record.

2 (a-10) (a) Reporting to the Registry. The Department on
3 Aging shall report to the to the Department of Public Health's
4 Health Care Worker Registry the identity of the caregiver when
5 a and administrative finding of a verified and substantiated
6 finding decision of abuse, neglect, or financial exploitation
7 of an eligible adult under this Act that is made against a
8 caregiver, and all appeals, challenges, and reviews, if any,
9 have been completed and a finding for placement on the Registry
10 has been sustained or upheld. any caregiver, including
11 consultants and volunteers, employed by a provider licensed,
12 certified, or regulated by, or paid with public funds from, the
13 Department of Public Health, Healthcare and Family Services, or
14 Human Services, or the Department on Aging. For uncompensated
15 or privately paid caregivers, the Department on Aging shall
16 report only a verified and substantiated decision of
17 significant abuse, neglect, or financial exploitation of an
18 eligible adult under this Act.

19 A An administrative finding against a caregiver that is
20 placed in the Registry shall preclude that any caregiver from
21 providing direct care, as defined in this Section access or
22 other services, including consulting and volunteering, in a
23 position with or that is regulated by or paid with public funds
24 from the Department on Aging, the Department of Healthcare and
25 Family Services, the Department of Human Services, or the
26 Department of Public Health or with an entity or provider

1 ~~licensed, certified, or regulated by or paid with public funds~~
2 ~~from any of these State agencies a provider that is licensed,~~
3 ~~certified, or regulated by, or paid with public funds from or~~
4 ~~on behalf of, the State of Illinois or any Department thereof,~~
5 ~~that permits the caregiver direct access to an adult aged 60 or~~
6 ~~older or an adult, over 18, with a disability or to that~~
7 ~~individual's living quarters or personal, financial, or~~
8 ~~medical records.~~

9 (b) Definitions. As used in this Section:

10 "Direct care" includes, but is not limited to, direct
11 access to a person aged 60 or older or to an adult with
12 disabilities aged 18 through 59 ~~to an individual,~~ his or her
13 living quarters, or his or her personal, financial, or medical
14 records for the purpose of providing nursing care or assistance
15 with feeding, dressing, movement, bathing, toileting, other
16 personal needs and activities of daily living or instrumental
17 activities of daily living, or assistance with financial
18 transactions.

19 "Participant" means an individual who uses the services of
20 an in-home care program funded through the Department on Aging,
21 the Department of Healthcare and Family Services, the
22 Department of Human Services, or the Department of Public
23 Health.

24 ~~"Privately paid caregiver" means any caregiver who has been~~
25 ~~paid with resources other than public funds, regardless of~~
26 ~~licensure, certification, or regulation by the State of~~

1 ~~Illinois and any Department thereof. A privately paid caregiver~~
2 ~~does not include any caregiver that has been licensed,~~
3 ~~certified, or regulated by a State agency, or paid with public~~
4 ~~funds.~~

5 ~~"Significant" means a finding of abuse, neglect, or~~
6 ~~financial exploitation as determined by the Department that (i)~~
7 ~~represents a meaningful failure to adequately provide for, or a~~
8 ~~material indifference to, the financial, health, safety, or~~
9 ~~medical needs of an eligible adult or (ii) results in an~~
10 ~~eligible adult's death or other serious deterioration of an~~
11 ~~eligible adult's financial resources, physical condition, or~~
12 ~~mental condition.~~

13 ~~"Uncompensated caregiver" means a caregiver who, in an~~
14 ~~informal capacity, assists an eligible adult with activities of~~
15 ~~daily living, financial transactions, or chore housekeeping~~
16 ~~type duties. "Uncompensated caregiver" does not refer to an~~
17 ~~individual serving in a formal capacity as a volunteer with a~~
18 ~~provider licensed, certified, or regulated by a State agency.~~

19 (c) Access to and use of the Registry. Access to the
20 Registry shall be limited to the Department on Aging, the
21 Department of Healthcare and Family Services, the Department of
22 Human Services, and the Department of Public Health and
23 providers of direct care as described in subsection (a-10) of
24 this Section. These State agencies and providers licensed,
25 ~~certified, or regulated providers by the Department of Public~~
26 ~~Health, Healthcare and Family Service, or Human Services, or~~

1 ~~the Department on Aging. The State of Illinois, any Department~~
2 ~~thereof, or a provider licensed, certified, or regulated, or~~
3 ~~paid with public funds by, from, or on behalf of the Department~~
4 ~~of Public Health, Healthcare and Family Services, or Human~~
5 ~~Services, or the Department on Aging,~~ shall not hire, or
6 compensate either directly or on behalf of a participant, or
7 utilize the services of any person seeking ~~employment, retain~~
8 ~~any contractors, or accept any volunteers~~ to provide direct
9 care without first conducting an online check of whether the
10 person has been placed on the Registry ~~the person through the~~
11 ~~Department of Public Health's Health Care Worker Registry.~~
12 These State agencies and providers ~~The provider~~ shall maintain
13 a copy of the results of the online check to demonstrate
14 compliance with this requirement. These State agencies and
15 providers are ~~The provider is~~ prohibited from retaining,
16 hiring, compensating either directly or on behalf of a
17 participant, or utilizing the services of ~~accepting~~ a person to
18 provide direct care if, ~~including as a consultant or volunteer,~~
19 ~~for whom~~ the online check of the person reveals a verified and
20 substantiated finding ~~claim~~ of abuse, neglect, or financial
21 exploitation that has been placed on the Registry or when the
22 State agencies or providers otherwise gain knowledge of such
23 placement on the Registry ~~, to provide direct access to any~~
24 ~~adult aged 60 or older or any adult, over 18, with a~~
25 ~~disability. Additionally, a provider is prohibited from~~
26 ~~retaining a person for whom they gain knowledge of a verified~~

1 ~~and substantiated claim of abuse, neglect, or financial~~
2 ~~exploitation in a position that permits the caregiver direct~~
3 ~~access to provide direct care to any adult aged 60 or older or~~
4 ~~any adult, over 18, with a disability or direct access to that~~
5 ~~individual's living quarters or personal, financial, or~~
6 ~~medical records.~~ Failure to comply with this requirement may
7 subject such a provider to corrective action by the appropriate
8 regulatory agency or other lawful remedies provided under the
9 applicable licensure, certification, or regulatory laws and
10 rules.

11 (d) Notice to caregiver. The Department on Aging shall
12 establish rules concerning notice to the caregiver in cases of
13 a verified and substantiated finding of abuse, neglect, or
14 financial exploitation against him or her that may make him or
15 her eligible for placement on the Registry.

16 (e) Notification to eligible adults, guardians, or agents.
17 As part of its investigation, the Department on Aging shall
18 notify an eligible adult, or an eligible adult's guardian or
19 agent, that his or her a caregiver's name may be placed on the
20 Registry based on a finding as described in subsection (a-10)
21 ~~(a-1)~~ of this Section.

22 (f) Notification to employer. The Department on Aging shall
23 notify the appropriate State agency or provider of direct care,
24 as described in subsection (a-10), when there is A provider
25 ~~licensed, certified, or regulated by the Department of Public~~
26 ~~Health, Healthcare and Family Services, or Human Services, or~~

1 ~~the Department on Aging shall be notified of an administrative~~
2 ~~finding against any caregiver who is an employee, consultant,~~
3 ~~or volunteer of a verified and substantiated finding decision~~
4 of abuse, neglect, or financial exploitation in a case of an
5 eligible adult under this Act that is reported on the Registry
6 and that involves one of its caregivers. That State agency or
7 provider is prohibited from retaining or compensating that
8 individual in a position that involves direct care, and if. ~~If~~
9 there is an imminent risk of danger to the victim eligible
10 ~~adult~~ or an imminent risk of misuse of personal, medical, or
11 financial information, that the caregiver shall immediately be
12 barred from providing direct care access to the victim eligible
13 ~~adult, his or her living quarters, or his or her personal,~~
14 ~~financial, or medical records,~~ pending the outcome of any
15 challenge, appeal, criminal prosecution, or other type of
16 collateral action.

17 (g) Challenges and appeals ~~Caregiver challenges~~. The
18 Department on Aging shall establish, by rule, procedures
19 concerning ~~caregiver~~ challenges and appeals to placement on the
20 Registry pursuant to legislative intent. The Department shall
21 not make any report to the Registry pending challenges or
22 appeals.

23 (h) Caregiver's rights to collateral action. The
24 Department on Aging shall not make any report to the Registry
25 if a caregiver notifies the Department in writing, ~~including~~
26 ~~any supporting documentation,~~ that he or she is formally

1 challenging an adverse employment action resulting from a
2 verified and substantiated finding of abuse, neglect, or
3 financial exploitation by complaint filed with the Illinois
4 Civil Service Commission, or by another means which seeks to
5 enforce the caregiver's rights pursuant to any applicable
6 collective bargaining agreement. If an action taken by an
7 employer against a caregiver as a result of a such a finding ~~of~~
8 ~~abuse, neglect, or financial exploitation~~ is overturned
9 through an action filed with the Illinois Civil Service
10 Commission or under any applicable collective bargaining
11 agreement after that caregiver's name has already been sent to
12 the Registry, the caregiver's name shall be removed from the
13 Registry.

14 (i) Removal from Registry. At any time after a report to
15 the Registry, but no more than once in each successive 3-year
16 period thereafter, for a maximum of 3 such requests, a
17 caregiver may ~~write to the Director of the Department on Aging~~
18 ~~to~~ request removal of his or her name from the Registry in
19 relationship to a single incident. The caregiver shall bear the
20 burden of establishing ~~showing cause that establishes,~~ by a
21 preponderance of the evidence, that removal of his or her name
22 from the Registry is in the public interest. Upon receiving
23 such a request, the Department on Aging shall conduct an
24 investigation and consider any evidentiary material provided.
25 The Department shall issue a decision either granting or
26 denying removal ~~within 60 calendar days, and shall issue such~~

1 ~~decision~~ to the caregiver and report it to the Registry. ~~The~~
2 ~~waiver process at the Department of Public Health does not~~
3 ~~apply to Registry reports from the Department on Aging.~~ The
4 Department ~~on Aging~~ shall, by rule, establish standards and a
5 process for requesting the removal of a name from the Registry
6 by rule.

7 (j) Referral of Registry reports to health care facilities.
8 In the event an eligible adult receiving services from a
9 provider agency changes his or her residence from a domestic
10 living situation to that of a health care or long term care
11 facility, the provider agency shall use reasonable efforts to
12 promptly inform the ~~health care~~ facility and the appropriate
13 Regional Long Term Care Ombudsman about any Registry reports
14 relating to the eligible adult. For purposes of this Section, a
15 health care or long term care facility includes, but is not
16 limited to, any residential facility licensed, certified, or
17 regulated by the Department of Public Health, Healthcare and
18 Family Services, or Human Services.

19 (k) The Department on Aging and its employees and agents
20 shall have immunity, except for intentional willful and wanton
21 misconduct, from any liability, civil, criminal, or otherwise,
22 for reporting information to and maintaining the Registry.

23 (Source: P.A. 98-49, eff. 1-1-14; revised 11-12-13.)

24 (320 ILCS 20/8) (from Ch. 23, par. 6608)

25 Sec. 8. Access to records. All records concerning reports

1 of abuse, neglect, financial exploitation, or self-neglect and
2 all records generated as a result of such reports shall be
3 confidential and shall not be disclosed except as specifically
4 authorized by this Act or other applicable law. In accord with
5 established law and Department protocols, procedures, and
6 policies, access to such records, but not access to the
7 identity of the person or persons making a report of alleged
8 abuse, neglect, financial exploitation, or self-neglect as
9 contained in such records, shall be provided, upon request, to
10 the following persons and for the following persons:

11 (1) Department staff, provider agency staff, other
12 aging network staff, and regional administrative agency
13 staff, including staff of the Chicago Department on Aging
14 while that agency is designated as a regional
15 administrative agency, in the furtherance of their
16 responsibilities under this Act;

17 (2) A law enforcement agency investigating known or
18 suspected abuse, neglect, financial exploitation, or
19 self-neglect. Where a provider agency has reason to believe
20 that the death of an eligible adult may be the result of
21 abuse or neglect, including any reports made after death,
22 the agency shall immediately provide the appropriate law
23 enforcement agency with all records pertaining to the
24 eligible adult;

25 (2.5) A law enforcement agency, fire department
26 agency, or fire protection district having proper

1 jurisdiction pursuant to a written agreement between a
2 provider agency and the law enforcement agency, fire
3 department agency, or fire protection district under which
4 the provider agency may furnish to the law enforcement
5 agency, fire department agency, or fire protection
6 district a list of all eligible adults who may be at
7 imminent risk of abuse, neglect, financial exploitation,
8 or self-neglect;

9 (3) A physician who has before him or her or who is
10 involved in the treatment of an eligible adult whom he or
11 she reasonably suspects may be abused, neglected,
12 financially exploited, or self-neglected or who has been
13 referred to the Adult Protective Services Program;

14 (4) An eligible adult reported to be abused, neglected,
15 financially exploited, or self-neglected, or such adult's
16 authorized guardian or agent, unless such guardian or agent
17 is the abuser or the alleged abuser;

18 (4.5) An executor or administrator of the estate of an
19 eligible adult who is deceased;

20 (5) In cases regarding abuse, neglect, or financial
21 exploitation, a court or a guardian ad litem, upon its or
22 his or her finding that access to such records may be
23 necessary for the determination of an issue before the
24 court. However, such access shall be limited to an in
25 camera inspection of the records, unless the court
26 determines that disclosure of the information contained

1 therein is necessary for the resolution of an issue then
2 pending before it;

3 (5.5) In cases regarding self-neglect, a guardian ad
4 litem;

5 (6) A grand jury, upon its determination that access to
6 such records is necessary in the conduct of its official
7 business;

8 (7) Any person authorized by the Director, in writing,
9 for audit or bona fide research purposes;

10 (8) A coroner or medical examiner who has reason to
11 believe that an eligible adult has died as the result of
12 abuse, neglect, financial exploitation, or self-neglect.
13 The provider agency shall immediately provide the coroner
14 or medical examiner with all records pertaining to the
15 eligible adult;

16 (8.5) A coroner or medical examiner having proper
17 jurisdiction, pursuant to a written agreement between a
18 provider agency and the coroner or medical examiner, under
19 which the provider agency may furnish to the office of the
20 coroner or medical examiner a list of all eligible adults
21 who may be at imminent risk of death as a result of abuse,
22 neglect, financial exploitation, or self-neglect;

23 (9) Department of Financial and Professional
24 Regulation staff and members of the Illinois Medical
25 Disciplinary Board or the Social Work Examining and
26 Disciplinary Board in the course of investigating alleged

1 violations of the Clinical Social Work and Social Work
2 Practice Act by provider agency staff or other licensing
3 bodies at the discretion of the Director of the Department
4 on Aging;

5 (9-a) Department of Healthcare and Family Services
6 staff when that Department is funding services to the
7 eligible adult, including access to the identity of the
8 eligible adult;

9 (9-b) Department of Human Services staff when that
10 Department is funding services to the eligible adult or is
11 providing reimbursement for services provided by the
12 abuser or alleged abuser, including access to the identity
13 of the eligible adult;

14 (10) Hearing officers in the course of conducting an
15 administrative hearing under this Act; parties to such
16 hearing shall be entitled to discovery as established by
17 rule; to determine whether a verified and substantiated
18 finding of significant abuse, neglect, or financial
19 exploitation of an eligible adult by a caregiver warrants
20 reporting to the Health Care Worker Registry; and

21 (11) A caregiver who challenges placement on the
22 Registry shall be given the statement of allegations in the
23 abuse report and the substantiation decision in the final
24 investigative report; and

25 (12) (11) The Illinois Guardianship and Advocacy
26 Commission and the agency designated by the Governor under

1 Section 1 of the Protection and Advocacy for
2 Developmentally Disabled Persons Act shall have access,
3 through the Department, to records, including the
4 findings, pertaining to a completed or closed
5 investigation of a report of suspected abuse, neglect,
6 financial exploitation, or self-neglect of an eligible
7 adult.

8 (Source: P.A. 97-864, eff. 1-1-13; 98-49, eff. 7-1-13.)

9 (320 ILCS 20/9) (from Ch. 23, par. 6609)

10 Sec. 9. Authority to consent to services.

11 (a) If an eligible adult consents to an assessment of a
12 reported incident of suspected abuse, neglect, financial
13 exploitation, or self-neglect and, following the assessment of
14 such report, consents to services being provided according to
15 the case plan, such services shall be arranged to meet the
16 adult's needs, based upon the availability of resources to
17 provide such services. If an adult withdraws his or her consent
18 for an assessment of the reported incident or withdraws his or
19 her consent for services and refuses to accept such services,
20 the services shall not be provided.

21 (b) If it reasonably appears to the Department or other
22 agency designated under this Act that a person is an eligible
23 adult and lacks the capacity to consent to an assessment of a
24 reported incident of suspected abuse, neglect, financial
25 exploitation, or self-neglect or to necessary services, the

1 Department or other agency shall take appropriate action
2 necessary to ameliorate risk to the eligible adult if there is
3 a threat of ongoing harm or another emergency exists. The
4 Department or other agency shall be authorized to seek the
5 ~~notify the Illinois Guardianship and Advocacy Commission, the~~
6 ~~Office of State Guardian, or any other appropriate agency, of~~
7 ~~the potential need for~~ appointment of a temporary guardian as
8 provided in Article XIa of the Probate Act of 1975 for the
9 purpose of consenting to an assessment of the reported incident
10 and such services, together with an order for an evaluation of
11 the eligible adult's physical, psychological, and medical
12 condition and decisional capacity.

13 (c) A guardian of the person of an eligible adult may
14 consent to an assessment of the reported incident and to
15 services being provided according to the case plan. If an
16 eligible adult lacks capacity to consent, an agent having
17 authority under a power of attorney may consent to an
18 assessment of the reported incident and to services. If the
19 guardian or agent is the suspected abuser and he or she
20 withdraws consent for the assessment of the reported incident,
21 or refuses to allow services to be provided to the eligible
22 adult, the Department, an agency designated under this Act, or
23 the office of the Attorney General may request a court order
24 seeking appropriate remedies, and may in addition request
25 removal of the guardian and appointment of a successor guardian
26 or request removal of the agent and appointment of a guardian.

1 (d) If an emergency exists and the Department or other
2 agency designated under this Act reasonably believes that a
3 person is an eligible adult and lacks the capacity to consent
4 to necessary services, the Department or other agency may
5 request an ex parte order from the circuit court of the county
6 in which the petitioner or respondent resides or in which the
7 alleged abuse, neglect, financial exploitation, or
8 self-neglect occurred, authorizing an assessment of a report of
9 alleged or suspected abuse, neglect, financial exploitation,
10 or self-neglect or the provision of necessary services, or
11 both, including relief available under the Illinois Domestic
12 Violence Act of 1986 in accord with established law and
13 Department protocols, procedures, and policies. Petitions
14 filed under this subsection shall be treated as expedited
15 proceedings. When an eligible adult is at risk of serious
16 injury or death and it reasonably appears that the eligible
17 adult lacks capacity to consent to necessary services, the
18 Department or other agency designated under this Act may take
19 action necessary to ameliorate the risk in accordance with
20 administrative rules promulgated by the Department.

21 (d-5) For purposes of this Section, an eligible adult
22 "lacks the capacity to consent" if qualified staff of an agency
23 designated under this Act reasonably determine, in accordance
24 with administrative rules promulgated by the Department, that
25 he or she appears either (i) unable to receive and evaluate
26 information related to the assessment or services or (ii)

1 unable to communicate in any manner decisions related to the
2 assessment of the reported incident or services.

3 (e) Within 15 days after the entry of the ex parte
4 emergency order, the order shall expire, or, if the need for
5 assessment of the reported incident or services continues, the
6 provider agency shall petition for the appointment of a
7 guardian as provided in Article XIa of the Probate Act of 1975
8 for the purpose of consenting to such assessment or services or
9 to protect the eligible adult from further harm.

10 (f) If the court enters an ex parte order under subsection
11 (d) for an assessment of a reported incident of alleged or
12 suspected abuse, neglect, financial exploitation, or
13 self-neglect, or for the provision of necessary services in
14 connection with alleged or suspected self-neglect, or for both,
15 the court, as soon as is practicable thereafter, shall appoint
16 a guardian ad litem for the eligible adult who is the subject
17 of the order, for the purpose of reviewing the reasonableness
18 of the order. The guardian ad litem shall review the order and,
19 if the guardian ad litem reasonably believes that the order is
20 unreasonable, the guardian ad litem shall file a petition with
21 the court stating the guardian ad litem's belief and requesting
22 that the order be vacated.

23 (g) In all cases in which there is a substantiated finding
24 of abuse, neglect, or financial exploitation by a guardian, the
25 Department shall, within 30 days after the finding, notify the
26 Probate Court with jurisdiction over the guardianship.

1 (Source: P.A. 98-49, eff. 7-1-13.)

2 (320 ILCS 20/13)

3 Sec. 13. Access.

4 (a) In accord with established law and Department
5 protocols, procedures, and policies, the designated provider
6 agencies shall have access to eligible adults who have been
7 reported or found to be victims of abuse, neglect, financial
8 exploitation, or self-neglect in order to assess the validity
9 of the report, assess other needs of the eligible adult, and
10 provide services in accordance with this Act.

11 (a-5) A representative of the Department or a designated
12 provider agency that is actively involved in an abuse, neglect,
13 financial exploitation, or self-neglect investigation under
14 this Act shall be allowed access to the financial records,
15 mental and physical health records, and other relevant
16 evaluative records of the eligible adult which are in the
17 possession of any individual, financial institution, health
18 care provider, mental health provider, educational facility,
19 or other facility if necessary to complete the investigation
20 mandated by this Act. The provider or facility shall provide
21 such records to the representative upon receipt of a written
22 request and certification from the Department or designated
23 provider agency that an investigation is being conducted under
24 this Act and the records are pertinent to the investigation.

25 Any records received by such representative, the

1 confidentiality of which is protected by another law or rule,
2 shall be maintained as confidential, except for such use as may
3 be necessary for any administrative or other legal proceeding.

4 (b) Where access to an eligible adult is denied, including
5 the refusal to provide requested records, the Office of the
6 Attorney General, the Department, or the provider agency may
7 petition the court for an order to require appropriate access
8 where:

9 (1) a caregiver or third party has interfered with the
10 assessment or service plan, or

11 (2) the agency has reason to believe that the eligible
12 adult is denying access because of coercion, extortion, or
13 justifiable fear of future abuse, neglect, or financial
14 exploitation.

15 (c) The petition for an order requiring appropriate access
16 shall be afforded an expedited hearing in the circuit court.

17 (d) If the provider agency has substantiated financial
18 exploitation against an eligible adult, and has documented a
19 reasonable belief that the eligible adult will be irreparably
20 harmed as a result of the financial exploitation, the Office of
21 the Attorney General, the Department, or the provider agency
22 may petition for an order freezing the assets of the eligible
23 adult. The petition shall be filed in the county or counties in
24 which the assets are located. The court's order shall prohibit
25 the sale, gifting, transfer, or wasting of the assets of the
26 eligible adult, both real and personal, owned by, or vested in,

1 the eligible adult, without the express permission of the
2 court. The petition to freeze the assets of the eligible adult
3 shall be afforded an expedited hearing in the circuit court.

4 (Source: P.A. 96-526, eff. 1-1-10.)

5 (320 ILCS 20/15)

6 Sec. 15. ~~Abuse~~ Fatality Review Teams.

7 (a) State policy.

8 (1) Both the State and the community maintain a
9 commitment to preventing the abuse, neglect, and financial
10 exploitation of at-risk adults. This includes a charge to
11 bring perpetrators of crimes against at-risk adults to
12 justice and prevent untimely deaths in the community.

13 (2) When an at-risk adult dies, the response to the
14 death by the community, law enforcement, and the State must
15 include an accurate and complete determination of the cause
16 of death, and the development and implementation of
17 measures to prevent future deaths from similar causes.

18 (3) Multidisciplinary and multi-agency reviews of
19 deaths can assist the State and counties in developing a
20 greater understanding of the incidence and causes of
21 premature deaths and the methods for preventing those
22 deaths, improving methods for investigating deaths, and
23 identifying gaps in services to at-risk adults.

24 (4) Access to information regarding the deceased
25 person and his or her family by multidisciplinary and

1 multi-agency ~~at-risk adult~~ fatality review teams is
2 necessary in order to fulfill their purposes and duties.

3 (a-5) Definitions. As used in this Section:

4 "Advisory Council" means the Illinois ~~At-Risk Adult~~
5 Fatality Review Team Advisory Council.

6 "Review Team" means a regional interagency ~~at-risk~~
7 ~~adult~~ fatality review team.

8 (b) The Director, in consultation with the Advisory
9 Council, law enforcement, and other professionals who work in
10 the fields of investigating, treating, or preventing abuse or
11 neglect of at-risk adults, shall appoint members to a minimum
12 of one review team in each of the Department's planning and
13 service areas. Each member of a review team shall be appointed
14 for a 2-year term and shall be eligible for reappointment upon
15 the expiration of the term. A review team's purpose in
16 conducting review of at-risk adult deaths is: (i) to assist
17 local agencies in identifying and reviewing suspicious deaths
18 of adult victims of alleged, suspected, or substantiated abuse
19 or neglect in domestic living situations; (ii) to facilitate
20 communications between officials responsible for autopsies and
21 inquests and persons involved in reporting or investigating
22 alleged or suspected cases of abuse, neglect, or financial
23 exploitation of at-risk adults and persons involved in
24 providing services to at-risk adults; (iii) to evaluate means
25 by which the death might have been prevented; and (iv) to
26 report its findings to the appropriate agencies and the

1 Advisory Council and make recommendations that may help to
2 reduce the number of at-risk adult deaths caused by abuse and
3 neglect and that may help to improve the investigations of
4 deaths of at-risk adults and increase prosecutions, if
5 appropriate.

6 (b-5) Each such team shall be composed of representatives
7 of entities and individuals including, but not limited to:

8 (1) the Department on Aging;

9 (2) coroners or medical examiners (or both);

10 (3) State's Attorneys;

11 (4) local police departments;

12 (5) forensic units;

13 (6) local health departments;

14 (7) a social service or health care agency that
15 provides services to persons with mental illness, in a
16 program whose accreditation to provide such services is
17 recognized by the Division of Mental Health within the
18 Department of Human Services;

19 (8) a social service or health care agency that
20 provides services to persons with developmental
21 disabilities, in a program whose accreditation to provide
22 such services is recognized by the Division of
23 Developmental Disabilities within the Department of Human
24 Services;

25 (9) a local hospital, trauma center, or provider of
26 emergency medicine;

1 (10) providers of services for eligible adults in
2 domestic living situations; and

3 (11) a physician, psychiatrist, or other health care
4 provider knowledgeable about abuse and neglect of at-risk
5 adults.

6 (c) A review team shall review cases of deaths of at-risk
7 adults occurring in its planning and service area (i) involving
8 blunt force trauma or an undetermined manner or suspicious
9 cause of death, (ii) if requested by the deceased's attending
10 physician or an emergency room physician, (iii) upon referral
11 by a health care provider, (iv) upon referral by a coroner or
12 medical examiner, (v) constituting an open or closed case from
13 an adult protective services agency, law enforcement agency,
14 State's Attorney's office, or the Department of Human Services'
15 Office of the Inspector General that involves alleged or
16 suspected abuse, neglect, or financial exploitation; or (vi)
17 upon referral by a law enforcement agency or State's Attorney's
18 office. If such a death occurs in a planning and service area
19 where a review team has not yet been established, the Director
20 shall request that the Advisory Council or another review team
21 review that death. A team may also review deaths of at-risk
22 adults if the alleged abuse or neglect occurred while the
23 person was residing in a domestic living situation.

24 A review team shall meet not less than 6 times a year to
25 discuss cases for its possible review. Each review team, with
26 the advice and consent of the Department, shall establish

1 criteria to be used in discussing cases of alleged, suspected,
2 or substantiated abuse or neglect for review and shall conduct
3 its activities in accordance with any applicable policies and
4 procedures established by the Department.

5 (c-5) The Illinois ~~At Risk Adult~~ Fatality Review Team ~~Teams~~
6 Advisory Council, consisting of one member from each review
7 team in Illinois, shall be the coordinating and oversight body
8 for review teams and activities in Illinois. The Director may
9 appoint to the Advisory Council any ex-officio members deemed
10 necessary. Persons with expertise needed by the Advisory
11 Council may be invited to meetings. The Advisory Council must
12 select from its members a chairperson and a vice-chairperson,
13 each to serve a 2-year term. The chairperson or
14 vice-chairperson may be selected to serve additional,
15 subsequent terms. The Advisory Council must meet at least 4
16 times during each calendar year.

17 The Department may provide or arrange for the staff support
18 necessary for the Advisory Council to carry out its duties. The
19 Director, in cooperation and consultation with the Advisory
20 Council, shall appoint, reappoint, and remove review team
21 members.

22 The Advisory Council has, but is not limited to, the
23 following duties:

24 (1) To serve as the voice of review teams in Illinois.

25 (2) To oversee the review teams in order to ensure that
26 the review teams' work is coordinated and in compliance

1 with State statutes and the operating protocol.

2 (3) To ensure that the data, results, findings, and
3 recommendations of the review teams are adequately used in
4 a timely manner to make any necessary changes to the
5 policies, procedures, and State statutes in order to
6 protect at-risk adults.

7 (4) To collaborate with the Department in order to
8 develop any legislation needed to prevent unnecessary
9 deaths of at-risk adults.

10 (5) To ensure that the review teams' review processes
11 are standardized in order to convey data, findings, and
12 recommendations in a usable format.

13 (6) To serve as a link with review teams throughout the
14 country and to participate in national review team
15 activities.

16 (7) To provide the review teams with the most current
17 information and practices concerning at-risk adult death
18 review and related topics.

19 (8) To perform any other functions necessary to enhance
20 the capability of the review teams to reduce and prevent
21 at-risk adult fatalities.

22 The Advisory Council may prepare an annual report, in
23 consultation with the Department, using aggregate data
24 gathered by review teams and using the review teams'
25 recommendations to develop education, prevention, prosecution,
26 or other strategies designed to improve the coordination of

1 services for at-risk adults and their families.

2 In any instance where a review team does not operate in
3 accordance with established protocol, the Director, in
4 consultation and cooperation with the Advisory Council, must
5 take any necessary actions to bring the review team into
6 compliance with the protocol.

7 (d) Any document or oral or written communication shared
8 within or produced by the review team relating to a case
9 discussed or reviewed by the review team is confidential and is
10 not admissible as evidence in any civil or criminal proceeding,
11 except for use by a State's Attorney's office in prosecuting a
12 criminal case against a caregiver. Those records and
13 information are, however, subject to discovery or subpoena, and
14 are admissible as evidence, to the extent they are otherwise
15 available to the public.

16 Any document or oral or written communication provided to a
17 review team by an individual or entity, and created by that
18 individual or entity solely for the use of the review team, is
19 confidential, is not subject to disclosure to or discoverable
20 by another party, and is not admissible as evidence in any
21 civil or criminal proceeding, except for use by a State's
22 Attorney's office in prosecuting a criminal case against a
23 caregiver. Those records and information are, however, subject
24 to discovery or subpoena, and are admissible as evidence, to
25 the extent they are otherwise available to the public.

26 Each entity or individual represented on the ~~abuse~~ fatality

1 review team may share with other members of the team
2 information in the entity's or individual's possession
3 concerning the decedent who is the subject of the review or
4 concerning any person who was in contact with the decedent, as
5 well as any other information deemed by the entity or
6 individual to be pertinent to the review. Any such information
7 shared by an entity or individual with other members of the
8 review team is confidential. The intent of this paragraph is to
9 permit the disclosure to members of the review team of any
10 information deemed confidential or privileged or prohibited
11 from disclosure by any other provision of law. Release of
12 confidential communication between domestic violence advocates
13 and a domestic violence victim shall follow subsection (d) of
14 Section 227 of the Illinois Domestic Violence Act of 1986 which
15 allows for the waiver of privilege afforded to guardians,
16 executors, or administrators of the estate of the domestic
17 violence victim. This provision relating to the release of
18 confidential communication between domestic violence advocates
19 and a domestic violence victim shall exclude adult protective
20 service providers.

21 A coroner's or medical examiner's office may share with the
22 review team medical records that have been made available to
23 the coroner's or medical examiner's office in connection with
24 that office's investigation of a death.

25 Members of a review team and the Advisory Council are not
26 subject to examination, in any civil or criminal proceeding,

1 concerning information presented to members of the review team
2 or the Advisory Council or opinions formed by members of the
3 review team or the Advisory Council based on that information.
4 A person may, however, be examined concerning information
5 provided to a review team or the Advisory Council.

6 (d-5) Meetings of the review teams and the Advisory Council
7 may be closed to the public under the Open Meetings Act.
8 Records and information provided to a review team and the
9 Advisory Council, and records maintained by a team or the
10 Advisory Council, are exempt from release under the Freedom of
11 Information Act.

12 (e) A review team's recommendation in relation to a case
13 discussed or reviewed by the review team, including, but not
14 limited to, a recommendation concerning an investigation or
15 prosecution, may be disclosed by the review team upon the
16 completion of its review and at the discretion of a majority of
17 its members who reviewed the case.

18 (e-5) The State shall indemnify and hold harmless members
19 of a review team and the Advisory Council for all their acts,
20 omissions, decisions, or other conduct arising out of the scope
21 of their service on the review team or Advisory Council, except
22 those involving willful or wanton misconduct. The method of
23 providing indemnification shall be as provided in the State
24 Employee Indemnification Act.

25 (f) The Department, in consultation with coroners, medical
26 examiners, and law enforcement agencies, shall use aggregate

1 data gathered by and recommendations from the Advisory Council
2 and the review teams to create an annual report and may use
3 those data and recommendations to develop education,
4 prevention, prosecution, or other strategies designed to
5 improve the coordination of services for at-risk adults and
6 their families. The Department or other State or county agency,
7 in consultation with coroners, medical examiners, and law
8 enforcement agencies, also may use aggregate data gathered by
9 the review teams to create a database of at-risk individuals.

10 (g) The Department shall adopt such rules and regulations
11 as it deems necessary to implement this Section.

12 (Source: P.A. 98-49, eff. 7-1-13.)

13 Section 99. Effective date. This Act takes effect upon
14 becoming law."